PAIENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2003									10/797577					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LE	NTITY	OR		R'THAN' ENTITY		
1	OTAL CLAIM	IS	14	4)				TE	FEE	7	RATE	FEE		
F	OR	•	NUMBER FILED		NUMBER EXTRA		BASI	FEE	385.00	OR	BASIC FEE	770.00		
T	OTAL CHARG	EABLE CLAIMS	14 m	4 minus 20=		-	X\$	9=		OR	X\$18=			
IN	DEPENDENT	CLAIMS	LAT	La minus 3 =			X4:	3=		1	X86=	86		
М	ULTIPLE DEPE	ENDENT CLAIM I	PRESENT	RESENT			-			OR	·	gp		
* If the difference in column 1 is less than zero, enter "0" in column 2							+14			OR	+290=	7 8 Å		
							TOT	AL		OR	TOTAL	450		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO	ST IEA USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	-14	Minus	/(1	=	X\$ 9	=		OR	X\$18=			
ME	Independent	1. 4	Minus	*** .	4	=	X43			OR	X86=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145			1	. 200			
								= TAL		OR	+290≈ TOTAL			
		(Column 1)		(Colum	.c. 2\	(Column 2)	ADDIT.			OR ,	ADDIT. FEE			
AMENDMENT B	•	CLAIMS REMAINING		HIGHE	ST	(Column 3)		7	ADDI-	I [ADDI-		
		AFTER AMENDMENT		PAID F	JSLY	PRESENT EXTRA	RAT		TIONAL FEE		RATE	TIONAL FEE		
	Total ·	*	Minus			= ,	X\$ 9	=		OR	X\$18=			
	Independent	*	Minus	***		=	X43:			OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=			
							TO ADDIT, F			OR ,	TOTAL ADDIT, FEE			
_	· ·	(Column 1)		(Columi		(Column 3)								
L L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PRÉVIOU PAID FO	R	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	**		= .	X\$ 9=	1		OR	X\$18=	_,		
	Independent	rt .	Minus	***		=	X43=	-}-			X86=			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						A43=	+	·	OR	V00=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3,										OR	+290=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE			
Ti	e Highest Num	ber Previously Paid	For (Total or	Independent) is the l	nighest number f	ound in the	appro	opriate box	in colu	mn 1.			